

TELEPHONE (312) 258-5500

SCHIFF HARDIN & WAITE

MAIL STOP AF

PATENT DEPARTMENT
6600 SEARS TOWER
233 SOUTH WACKER DRIVE
CHICAGO, ILLINOIS 60606
GROUP ART UNIT: 2859

RECEIVED
CENTRAL FAX CENTER

In re application of: Oliver Heid
SERIAL NO.: 09/840,577
FILED: April 23, 2001
TITLE: "ELECTRICAL COIL"

EXAMINER: D. Vargas
CONFIRMATION NO.: 3801

MAR 11 2004

OFFICIAL

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

SIR:

Transmitted herewith is an amendment in the above-identified application.
 No additional fee is required.

The fee has been calculated as shown below.

"AMENDMENT 'D'"

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	*12	MINUS	**20	X	() X 9.00 () X 18.00	
INDEP. CLAIMS	*1	MINUS	3	X	() X 40.00 () X 80.00	
Application amended to contain any multiple dependent claims not previously paid for.				() YES () NO	() \$135.00 () \$270.00 ONE TIME	
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT		\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated _____ for _____ months so that the period for response is extended to _____. A check in the amount of \$_____ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.

A check in the amount of \$_____ is attached.

A check for \$_____ accompanying IDS under 37 CFR 1.97(c) is attached.

A check for \$_____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.

The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed. When phoning re this application, please call (312) 258-5500.

SCHIFF HARDIN & WAITE (Customer Number: 26574)

BY Steven H. Noll (28,982)CERTIFICATE OF MAILING BY FACSIMILE

I hereby certify that this correspondence is being telefaxed to Examiner DIXOMARA VARGAS at (703) 872-9306 in the United States Patent and Trademark Office, Washington, D.C. 20231 on March 11, 2004.

Steven H. Noll

NAME OF APPLICANT'S ATTORNEY

SIGNATURE

March 11, 2004

DATE

TELEPHONE (312) 258-5500

SCHIFF HARDIN & WAITE

MAIL STOP AF

PATENT DEPARTMENT

6600 SEARS TOWER

233 SOUTH WACKER DRIVE

CHICAGO, ILLINOIS 60606

GROUP ART UNIT: 2859

In re application of: Oliver Heid

SERIAL NO.: 09/840,577

FILED: April 23, 2001

TITLE: "ELECTRICAL COIL"

EXAMINER: D. Vargas

CONFIRMATION NO.: 3801

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450
SIR:"AMENDMENT 'D"Transmitted herewith is an amendment in the above-identified application.
 No additional fee is required.
The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	*12	MINUS	**20	X	() X 9.00 () X 18.00	
INDEP. CLAIMS	*1	MINUS	3	X	() X 40.00 () X 80.00	
Application amended to contain any multiple dependent claims not previously paid for.				() YES () NO	() \$135.00 () \$270.00 ONE TIME	
			TOTAL ADDITIONAL FEE FOR THIS AMENDMENT		\$0.00	

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated _____ for _____ months so that the period for response is extended to _____. A check in the amount of \$_____ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.

A check in the amount of \$_____ is attached.

A check for \$_____ accompanying IDS under 37 CFR 1.97(c) is attached

A check for \$_____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached

The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed. When phoning re this application, please call (312) 258-5500.

SCHIFF HARDIN & WAITE (Customer Number 26574)

BY Steven H. Noll (28,982)CERTIFICATE OF MAILING BY FACSIMILE

I hereby certify that this correspondence is being telefaxed to Examiner DIXOMARA VARGAS at (703) 872-9306 in the United States Patent and Trademark Office, Washington, D.C. 20231 on March 11, 2004.

Steven H. Noll

NAME OF APPLICANT'S ATTORNEY

Steven H. Noll

SIGNATURE

March 11, 2004

DATE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE **RECEIVED**
CENTRAL FAX CENTER**AMENDMENT "D"**

MAR 11 2004

APPLICANT: Oliver Heid GROUP ART UNIT: 2862
SERIAL NO.: 09/840,577 EXAMINER: Dixomara Vargas
FILED: April 23, 2001 CONFIRMATION NO.: 3801
TITLE: "ELECTRICAL COIL"

ATTN: MAIL STOP AF
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

OFFICIAL

SIR:

In response to the Office Action dated December 30, 2003, Applicant herewith amends the application as follows.